

STATE OF MISSOURI
DEPARTMENT OF NATURAL RESOURCES
ST. LOUIS REGIONAL OFFICE
7545 S. LINDBERGH, SUITE 210
ST. LOUIS MO 63125 (314) 416-2960

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VAPOR RECOVERY SYSTEM CONSTRUCTION/OPERATING PERMIT APPLICATION

SECTION A - GENERAL APPLICATION INFORMATION									
FACILITY NAME				COUNTY					
FACILITY STREET ADDRESS			CITY		STATE	ZIP			
FACILITY TELEPHONE NUMB	CILITY TELEPHONE NUMBER FACILITY DESIG			DN	DESIGNATED PERSON TELI	DESIGNATED PERSON TELEPHONE NUMBER			
OWNERS NAME					OWNERS TELEPHONE NUM	BER			
OWNERS MAILING ADDRESS			CITY		STATE	ZIP			
SECTION B - TYPE OF APPLICATION (CHECK ALL APPROPRIATE BOXES)									
Operating Permi	it: 🗆 Initial	Renewa	ıl 🗆	Post Construction					
☐ Construction Permit: ☐ New Facility ☐ Existing Facility Modification/Reconstruction									
BRIEF DESCRIPTION OF THE	BRIEF DESCRIPTION OF THE PLANNED CONSTRUCTION								
SECTION C - STAG	E I INFORMATION								
STAGE I SYSTEM T	YPE (SPECIFY):	☐ Dual Sy	stem	Coaxial System					
PRODUCT TYPE	PRODUCT TYPE	TANK	SIZE	TANK TYPE	VAPOR LINE MANIFOLD (YES OR NO)	UNDERGROUND (YES OR NO)			
1.									
2.									
3.									
4.									
SECTION D - STAGE II INFORMATION									
SYSTEM			(N)		D: M				
Balance Number of Nozzles Vacuum Assist Number of Dispensers			Dispenser Model No).					
Other (Spec			f Dispenser						
SECTION E - APRIL	CANTS CERTIFICATION	NI STATEM	ENT						
SECTION E - APPLICANTS CERTIFICATION STATEMENT "I certify, based on information and belief formed after reasonable inquiry, the statements and information in this document are true, accurate									
and complete."				, ,,					
SIGNATURE OF RESPONSIBL	E OFFICIAL OF COMPANY					DATE			
TYPE OR PRINT NAME AND	OFFICIAL TITLE OF SIGNER					TELEPHONE NUMBER			
						()			

VAPOR RECOVERY OPERATING/CONSTRUCTION PERMITS

This form is to be used for Gasoline Vapor Recovery Operating and Construction Permits for facilities in Jefferson, Franklin, and St. Charles Counties. A One Hundred Dollar (\$100.00) permit fee is to be submitted for each Construction and/or Operating Permit requested by this application. Checks should be made payable to the MISSOURI DEPARTMENT OF NATURAL RESOURCES. The check along with the original application signed by a facility representative and required diagrams, plans, certification, etc., should be mailed or delivered to:

Missouri Department of Natural Resources c/o Vapor Recovery Unit Chief 7545 So. Lindbergh, Suite 210 St. Louis, MIssouri 63125

All permits issued through the St. Louis Regional Office will be mailed to the facility representative who signed the application. Copies of permits will be made available to contractors upon request.

Attach the following with your Construction Permit Applications:

- 1. A complete site specific diagram and a thorough description of the planned construction.
- 2. Plumbing diagrams including product lines, vapor lines, vent lines, slope of vapor return lines, diameters of all lines, etc.
- 3. A list of all equipment being installed and current California Air Resources Board (CARB) Executive Order numbers for the proposed system and/or components.
- 4. A list of the Missouri Petroleum Equipment Test Procedures (MOPETP) Approval numbers.
- 5. A copy of the Designated Employee Certificate for the facility.
- 6. Proof of underground storage tank registration and any other Missouri State permits that may apply.
- 7. Name of the contractor performing the work.

Attach the following with your Operating Permit Applications:

- 1. Plumbing diagrams including product lines, vapor lines, vent lines, slope of vapor return lines, diameter of all lines, etc.
- 2. A copy of the Designated Employee Certificate for the facility.
- 3. Proof of underground storage tank registration and any other Missouri State Permits that may apply.